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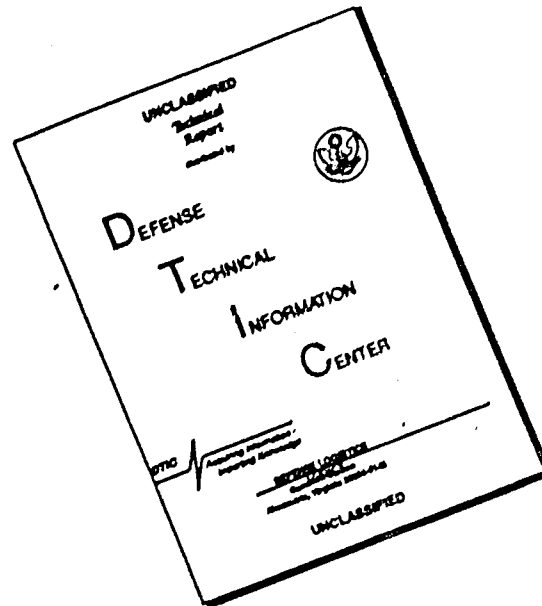
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DEPARTMENT OF THE ARMY
OFFICE OF THE ADJUTANT GENERAL
WASHINGTON, D.C. 20310

IN REPLY REFER TO

868560

AGDA (M) (17 Apr 70)

FOR OT UT 701219

24 April 1970

SUBJECT: Operational Report - Lessons Learned, Headquarters, 67th Medical Group, Period Ending 31 January 1970

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2. Information contained in this report is provided to insure appropriate benefits in the future from lessons learned during current operations and may be adapted for use in developing training material.

BY ORDER OF THE SECRETARY OF THE ARMY:

Kenneth G. Wickham

KENNETH G. WICKHAM
Major General, USA
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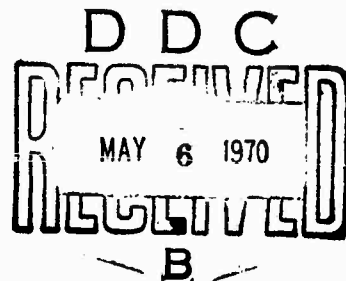
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DEPARTMENT OF THE ARMY
HEADQUARTERS, 67TH MEDICAL GROUP
APO San Francisco 96349

AVBJ GC-0

17 February 1970

SUBJECT: Operational Report-Lessons Learned Headquarters, 67th Medical Group, Period Ending 31 January 1970, RCS CSFOR-65 (R2)

Assistant Chief of Staff for Force Development
Department of the Army
Washington, D.C. 23010

1. Operations: Significant Activities.

a. During the period 1 November 1969 to 31 January 1970, the 67th Medical Group commanded and controlled 36 assigned units. This total includes 17 units that were assigned to the 67th Medical Group on 15 January 1970 after the inactivation of the 43d Medical Group. The 238th Medical Detachment (KA) and the 915th Medical Detachment (KH), attached units of the 27th Surgical Hospital, were inactivated effective 1 December 1969. On 19 December 1969 the 18th Surgical Hospital ceased operation as a MUST Hospital and moved to a fixed installation formerly occupied by the 3d Marine Medical Battalion. After relocating, the 18th Surgical Hospital assumed the additional responsibility of operating a 40 bed children's hospital. Organization of the 67th Medical Group as of 31 January 1970 is shown at inclosure 1. Work loads for air and ground ambulance movement are shown at inclosure 2. Total operating beds available within the 67th Medical Group hospital facilities at the end of the period were 1623. Admission and disposition workload data for group hospitals during this period is shown at inclosure 3. A list of distinguished visitors is attached at inclosure 4.

b. During the reporting period, Colonel Daniel W. Pratt, MC, was the Commanding Officer of 67th Medical Group. Lieutenant Colonel Frank A. Ortega, MSC, served as the Executive Officer and Command Sergeant Major James H. Smith served as the Group Command Sergeant Major. Major James G. Vermillion, MSC, served as the S1. Major Malcolm H. Wood, MSC, replaced Lieutenant Colonel Kenyon L. Forrest, MSC, as the S3. Lieutenant Colonel Buckley L. Drenner, MSC, served as the S4. Captain John A. Harper, AMSC, replaced Major Jessie S. Brewer, AMSC, as the Staff Dietician. Major George E. F. Stebbing, MC, served as the Staff Preventive Medicine Officer and Major Charles Webb, MSC, served as the Staff Aviation Advisor.

FOR OT UT

701219

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c. The 91st Evacuation Hospital was visited by a team of the International Commission of the Red Cross. The expressed purpose of this visit was to interview PW/Detainee patients and ascertain the hospital's professional and administrative capabilities in the treatment of PW. No discrepancies were noted in this visit and the treatment provided was rated as outstanding.

d. During this quarter the 67th Medical Group supported the following major tactical operations in XXIV Corps area conducted by the 101st Airborne Division (Airmobile) and the 1st Brigade, 5th Infantry Division (Mechanized): Republic Square, Norton Falls, Fulton Square, Randall Glenn and Green River. In the Americal Division area, operations supported consisted of Iron Mountain, Geneva Park and Frederick Hill.

e. The 67th Medical Group aircraft logged a total of 6281 flying hours, evacuating 17,019 patients. Thirty-seven incidents of aircraft sustaining damage as a result of hostile fire were reported. Nineteen were classified minor, eight as major and ten listed as incidents. Four individuals assigned to Group dustoff units sustained wounds, two of whom required out of country evacuation.

f. A training course for military quarantine inspectors was presented by in country representatives of the US Public Health Service and US Department of Agriculture in the Da Nang area during the period 3-5 December 1969. Training was presented to personnel of the 172d Preventive Medicine Unit and to US Marine and US Navy personnel selected for training as medical quarantine inspectors.

g. A ten hour course for Vietnamese food handlers on food service and sanitation has been presented in three 67th Medical Group hospitals by the consolidated civilian personnel office. The results of this instruction has been excellent and plans are in effect to present these classes in all group hospitals. Rations served during the reporting period are as follows:

	<u>November</u>	<u>December</u>	<u>January</u>
Total Rations Served	64686	57079	109317
Patient Rations Served	16383	16612	29704
Modified Diets	1689	1869	4395

2. Lessons Learned; Commander's Observations, Evaluations and Recommendations.

a. Personnel.

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(1) Rehabilitative Transfers UP AR 635-212.

(a) OBSERVATION: There is no required procedure for submitting rehabilitative transfers as required by AR 635-212 prior to eliminating soldiers for unsuitability or unfitness. Certain definitive criteria should be established to enable proper decisions for the best in personnel management.

(b) EVALUATION: Utilization of a prescribed format accomplishes three purposes:

1 Ensures that commanders have a clear insight into individual capabilities and performance.

2 Provides necessary information for the reassignment authority to make a decision.

3 Provides the gaining commander the background necessary to proceed with elimination if deemed appropriate.

(c) RECOMMENDATION: The following information to be submitted along with each request that a man be transferred for rehabilitative purposes LAW AR 635-212, paragraph 76(2).

1 Soldier's age and date and term of enlistment or induction.

2 A summary of those aspects of a soldier's behavior and duty performance in various jobs which indicate that a rehabilitative transfer is warranted.

3 Duty MOS and AFQT scores.

4 His aptitude area scores.

5 A record of counselling to include the name and duty position of the counsellor and the date of the counselling session.

6 A record of the soldier's convictions by court-martial to include the place and date of conviction and the nature of the offense.

7 A record of punishment UP Article 15, UCMJ to include the place and date of punishment and the specific nature of the violation warranting such punishment.

8 The soldier's ETS, DEROS and the number of months in RVN.

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(2) Unit Fund Audits.

(a) OBSERVATION: Unit funds must be audited at least once annually, upon dissolution, when a loss of funds or assets occurs, when a custodian is relieved for negligence and upon change of a custodian if required by the installation commander. At present there are no procedures established to insure a thorough accounting of a fund's finances.

(b) EVALUATION: With the addition of the units in Northern II Corps Tactical Zone, the 67th Medical Group has over thirty unit funds which require an annual audit. Guidelines must be established to expedite annual audits in a minimum amount of time.

(c) RECOMMENDATION: That the following guidelines be made policy at group level:

1 The audit period will be established by going through the records and determining the date of the last audit as indicated on the DA Form 3259-1 (Unit Fund Receipts, Expenditures and Property Record). The audit includes the latest month for which the fund has a bank statement.

2 The Net Worth of the fund on the date of the last audit is determined via the bank statement, checkbook, DA Form 1758 (Statement of Net Worth) and the DA Form 3259-1 (Unit Fund Receipts and Expenditure Record). The Net Worth figure from each one of these sources must be the same.

3 The analysis of a fund's transactions during the audit period can be accomplished by using a sheet of paper divided into two columns. In the left column all of the dividends received by the fund as recorded on the DA Form 3259-2 are listed including the month the dividend was for and the voucher number identifying the receipt. Months in which dividends were not received are noted.

4 In the right hand column all of the expenditures for the period are listed including the check number, the date of the check and the voucher number identifying the disbursement.

5 A check is made of the voucher numbers appearing on the page to insure that each transaction has a different voucher number and that the voucher numbers are consecutive.

6 A check is made of the DA Form 2107 (Nonappropriated Fund Receipt and Disbursement Voucher) to insure that each transaction is completely identified. The 2107 must have documentation in the form of bank deposit

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slips, receipts of purchase, bills and 1758's which are returned to the fund by the Central Post Fund after a dividend has been granted. Any 2107 which refers to a disbursement must also refer to the council minutes which authorized the transaction. All disbursements will be IAW USARV Regulation 230-21.

7 The checkbook is examined to insure that all of the transactions are accounted for. Check stubs must include the voucher to which the check pertains.

8 The dividend column and the expenditure column are each added. The dividend total is then added to the Net Worth Balance on the beginning date of the audit. The expenditure total is then subtracted and the figure resulting should be the Net Worth Balance of the ending date of the audit.

9 The figure obtained from the operations described in the three steps above are then checked with five documents from the final month of the audit period. This figure must be the same on the 3259-2, the reconciled bank statement, the 1758, the checkbook and the unit fund council minutes reconciliation for the final month. If these figures do not match a cross check must be made of all the fund's basic forms until the error or errors are found.

10 If the fund being audited is a consolidated fund, that is consisting of a unit fund and patient fund or more than one unit fund, a check must be made to insure that each fund within the consolidated fund has its own council (including separate presidents) and that separate monthly council meetings are being held. One custodian will keep the consolidated records, and the same audit procedures listed above will be used with the SF 1014 (General Ledger) being incorporated into the analysis.

11 These guidelines have proved effective in conducting a thorough and efficient audit. However, despite these guidelines the scheduling of an audit will vary depending on how well the custodian follows the administrative procedures used to maintain the fund.

b. Intelligence: None.

c. Operations:

(1) Overclassification of medical evacuation requests during the hours of darkness.

(a) OBSERVATION: Air ambulance units of this headquarters have received numerous patient evacuation requests during the hours of darkness

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that have been overclassified as urgent.

(b) EVALUATION: Individuals in the field are not aware of USARV Regulation 40-10, dated 3 April 1969. Guidelines in paragraph 4c(1)(a) provide that the patients classified urgent must be evacuated immediately to save life or limb. It is the policy of air ambulance units to evacuate all patients as soon as possible. The only occasions that classification affects the response of flight crews are when two or more requests are received within a relatively short time or during the hours of darkness.

(c) RECOMMENDATION: Continued command emphasis at company, group and brigade level directed at senior ground commanders and advisors. Request that the ground commanders fully utilize their assigned medical personnel to educate and assist the ground forces in proper classification of casualties.

d. Organization: None.

e. Training: None.

f. Logistics: None.

g. Communications.

(1) Single Side Band Radio Power Sources.

(a) OBSERVATION: The AN/FRC-93 (Single Side Band) radio which has operated erratically for units of this command is now operating correctly with the cobra head antenna and P/N 522-2639-004 power pack being used.

(b) EVALUATION: The power pack that was being used, the 30L-1, was not the correct power pack for the communications requirements. A Collins P/N 522-2639-004 has been substituted and the frequencies are no longer receiving too much power.

(c) RECOMMENDATION: That both the 30L and the Collins P/N 522-2639-004 power packs be considered when utilizing the AN/FRC-93 radio.

h. Materiel: None.


i. Other: None.

4 Incl

1. Organizational Chart
2. Air & Ground Amb Evac
3. Hospital AAD

~~4. Distinguished Visitors~~

Incl 4 wd HQ, DA


D.J. PRATT
COL, MC
Commanding

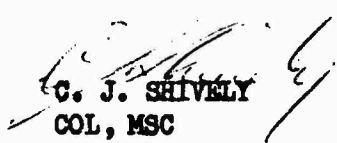
AVBJ PO (17 Feb 70) 1st Ind
SUBJECT: Operational Report - Lessons Learned Headquarters, 67th Medical
Group, Period Ending 31 January 1970, RCS CSFOR-65 (R2)

DA, Headquarters, US Army Medical Command, Vietnam (PROV), APO 96384
11 March 1970

TO: Commanding General, United States Army, Vietnam, ATTN: AVHGC DST
APO 96375

1. The subject report has been reviewed.
2. Reference item concerning rehabilitative transfers under provisions of AR 635-212, paragraph 2a (1). Concur. Recommendation is considered to have sufficient merit to be considered for incorporation into appropriate Army Regulations of the 614 and 635 series.
3. Reference item concerning unit fund audits, paragraph 2a (2). Concur. If the recommended procedure is being effectively utilized in the reporting headquarters then it should be continued.
4. Reference item concerning overclassification of medical evacuation requests during the hours of darkness, paragraph 2c (1). Concur. This lesson-learned will be disseminated to other medical units through USARV and Medical Command Commander's Notes.
5. Reference item concerning single side band radio power sources, paragraph 2g (1). Concur. This lesson learned will be distributed to subordinate units through Medical Command Commander's Notes.

FOR THE COMMANDER:


C. J. SHIVELY
COL, MSC
Chief of Staff

CF:
CO, 67th Med Gp
Asst Chief of Staff for Force Development

AVHGC-DST (17 Feb 70) 2d Ind

SUBJECT: Operational Report-Lessons Learned Headquarters, 67th Medical Group, Period Ending 31 January 1970, RCS CSFOR-65 (R2)

HEADQUARTERS, UNITED STATES ARMY, VIETNAM, APO San Francisco 96375 26 MAR 1970

TO: Commander in Chief, United States Army, Pacific, ATTN: GPOP-DT,
APO 96558


1. This headquarters has reviewed the Operational Report-Lessons Learned for the quarterly period ending 31 January 1970 from Headquarters, 67th Medical Group and concurs with the comments of indorsing headquarters.

2. Comments follow:

a. Reference item concerning "Single Sideband Radio Power Sources", page 6, paragraph 2g(1): concur. A 3ØL-1 is a linear power amplifier used to increase the power level of the RF energy fed to the antenna. The P/N 522-2639-004 is a power supply used to provide operating voltages to the KWM-2 or KWM2A. These units are not interchangeable. The AN/FRC-93 will operate without the 3ØL-1 but not without the P/N 522-2639-004.

b. Reference item concerning "Rehabilitative Transfers under Provisions of AR 635-212", page 2a(1): nonconcur. As rehabilitative transfers are normally made between Article 15 jurisdictions, and approved at Battalion level, extensive justifications are usually unnecessary since the approving authority will possess first hand knowledge of the individual's performance. Furthermore, normal administrative practice requires that sufficient information be included in any action to justify the request or recommendation. The items of data listed in the recommendation would be appropriate to include in a request for rehabilitative transfer but, depending on the circumstances of an individual case, other pertinent data might also be included.

FOR THE COMMANDER:


C. E. MICHELS
MAJ, AGC
Assistant Adjutant General

Cy furn:
US Army Med Comd
67th Med Gp

GPOP-DT (17 Feb 70) 3d Ind

SUBJECT: Operational Report of HQ, 67th Medical Group for Period Ending
31 January 1970, RCS CSFOR-65 (R2)

HQ, US Army, Pacific, APO San Francisco 96558 31 MAR 70

TO: Assistant Chief of Staff for Force Development, Department of the
Army, Washington, D. C. 20310

This headquarters concurs in subject report as indorsed.

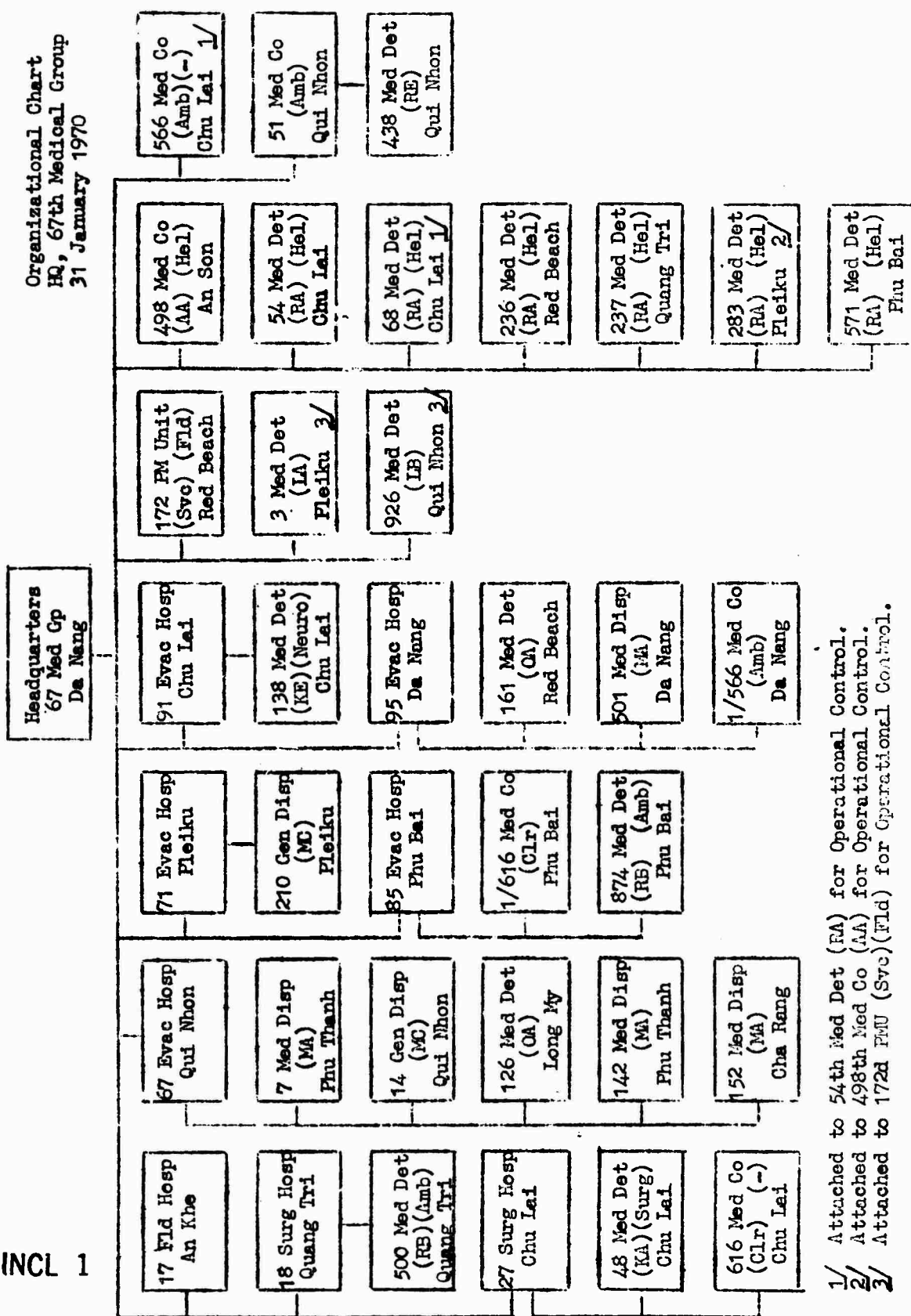
FOR THE COMMANDER IN CHIEF:

D.D. Cline

D.D. CLINE
2LT, AGC
Asst AG

INCL 1

Organizational Chart
HQ, 67th Medical Group
31 January 1970



- 1/ Attached to 54th Med Det (RA) for Operational Control.
- 2/ Attached to 498th Med Co (AA) for Operational Control.
- 3/ Attached to 172d PMU (Svc)(Fld) for Operational Control.

AMBULANCE EVACUATION
67TH MEDICAL GROUP UNITS

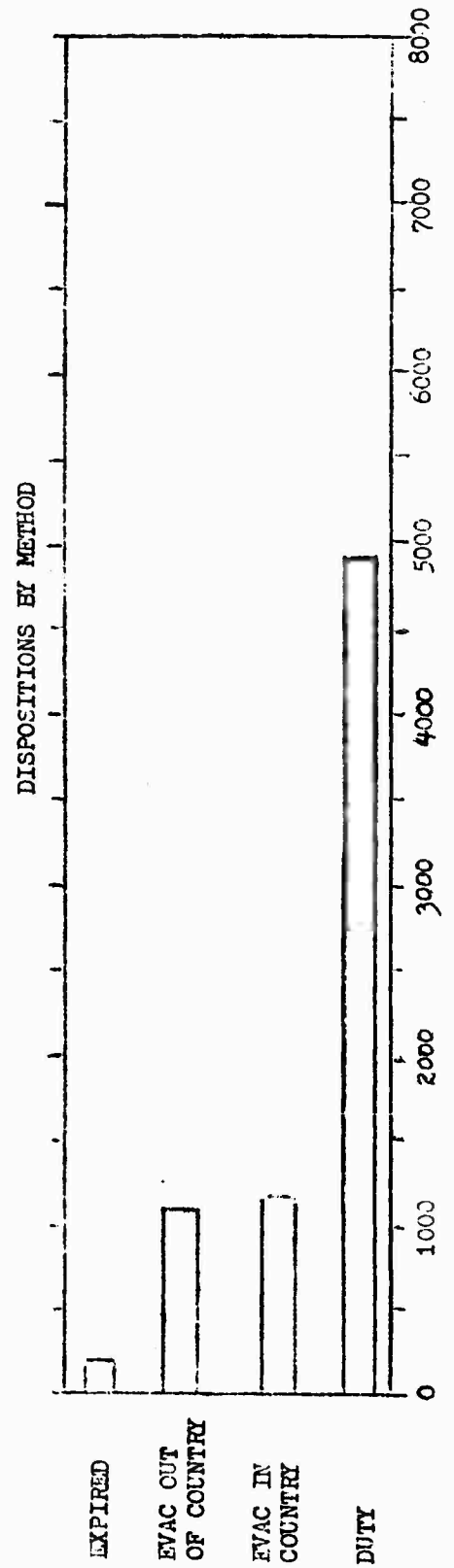
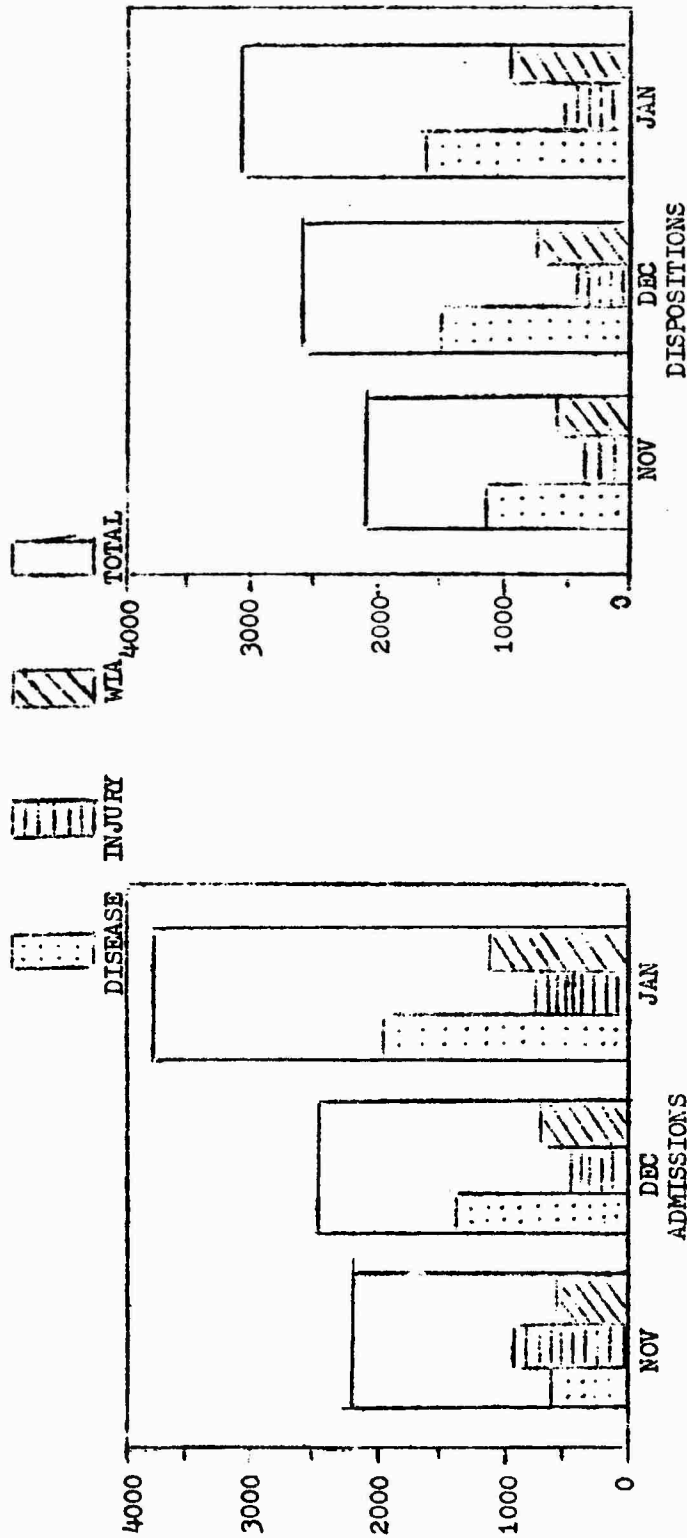
November 1969 - January 1970

	AIR	GROUND	GRAND TOTAL
US	6002	5650	11652
FWMAF	253	62	315
ARVN	2751	770	3521
OTHER	8013	2236	10249
GRAND TOTAL EVACUATED	17919	8718	25737
TOTAL MISSIONS	8348	4372	12720

INCL 2

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ADMISSIONS AND DISPOSITIONS 67TH MEDICAL GROUP HOSPITALS FACILITIES NOVEMBER 1969 THRU JANUARY 1970



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